STATE OF NEW JERSEY DEPARTMENT OF LABOR AND WORKFORCE DEVELOPMENT DIVISION OF WAGE & HOUR COMPLIANCE

DIVISION OF WAGE & HOUR COMPLIANCE Application for a permit to maintain payroll records outside of the State of New Jersey in accordance with Chapter 113, Laws of New Jersey, 1966 1. Name of Requesting Organization: Print Name of Requesting Officer: 2. Name and Address of Employer for which Permit County is requested: Telephone # Fax # E-mail Address Website Address Federal Employer Identification Number (FEIN) Name and Address of Out-of-State Location where County records will be maintained: Telephone # Fax # E-mail address Website Address Federal Employer Identification Number (FEIN) 4. Establishments in New Jersey for which request is being made: Name and Address Website Address Phone # Fax # E-mail Address 1. 2. 3. (If additional space is necessary, please attach additional sheets.) 5. Pay Period Ends (Day of Week) 6. Scheduled Payday (Day of Week) Describe form of record keening (time cards, ADP ner of ne best of

check cash	payroll, etc.
I certify that, all payroll records will be made available in the Labor and Workforce Development or his/her designee within my knowledge and belief, that all statements in this application	n 10 days of request. Furthermore, I certify that, to the
Signature and Title of Authorized Representative	Date